

7 February 1975

MEMORANDUM FOR: Director for Medical Services

SUBJECT : DCI and DO Level Objectives, FY
1976 - 77.

REFERENCE : Memo to D/MS from DD/A, dated 18
December 1974, subject FY 1976 -
77 Objective Statement.


In response to referenced memorandum all Division and Staff Chiefs were asked to submit their Objective Statements. These have been received and copies are attached. As you will note certain components did not respond and we must assume that they have no suggestions.

In the meeting scheduled for 2:00 p.m. Monday it is suggested that the attached suggestions be reviewed in the context of Mr. Blake's guidance, "Items which are significant and which can be effectively measured in terms of accomplishment." Those that we feel do not meet this criteria can be carried as Office Level Objectives in FY 76 - 77.

We should also review our present (FY 75) DCI and DD Level Objectives to determine if they should be carried forward at that level or be redescribed at the Office Level.

Finally, we should consider any suggestions that you or other members of the group might have that have not been previously expressed.

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Acting Chief, Support Division
Office of Medical Services

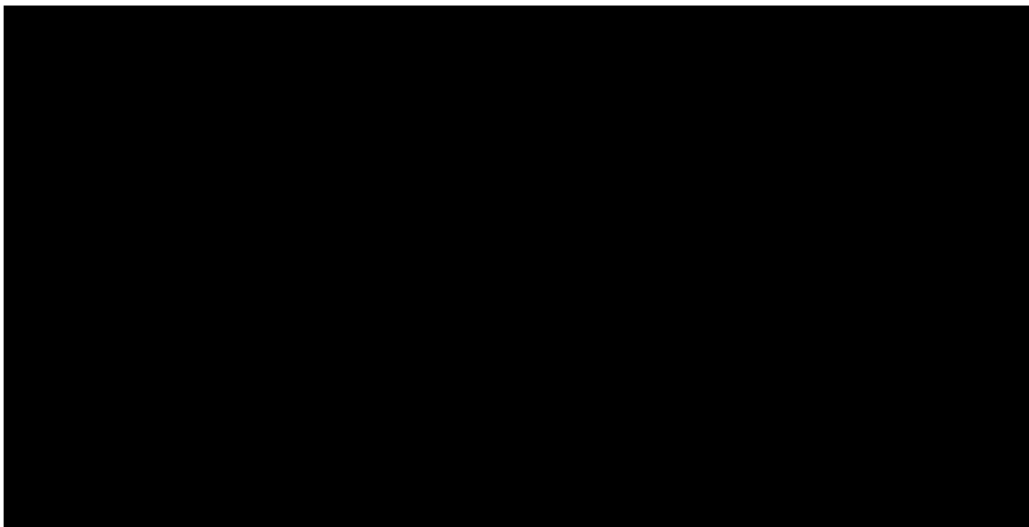
3 February 1975

MEMORANDUM FOR: Deputy Chief, Support Division

SUBJECT : FY 1976 - FY 1977 Objective Statements

1. The Psychiatric Staff hereby suggests that the provision of behavioral science resources for the handling of terrorist incidents merits consideration as an objective on the DCI level. (OMS has been active in this area and hopefully will be designated as a resource to the Department of State.) Alternatively, the terrorism objective might be aimed at the DD level since it involves inter-Directorate planning and relationships with the DDO.

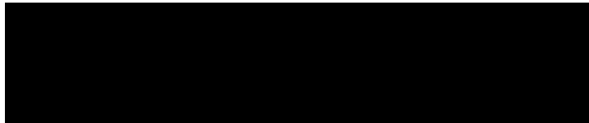
2. Also, the Psychiatric Staff suggests that the following 25X1A four objectives merit consideration on the DD level:



d). Development of the medical aspects of the Agency's alcohol program.

3. Each of the above proposed objectives on the DD level require planning, co-ordination and co-operation with other offices and Directorates of the Agency.

25X1A



Chief, Psychiatric Staff

20 January 1975

MEMORANDUM FOR: Deputy Chief, Support Division, Office of
Medical Services

SUBJECT : FY 1976-77 Objective Statements

REFERENCE : Your memo, this subject, 7 January 1975

1. I propose no DD-level objectives on behalf of PSS, but offer some comments on the MBO system in the light of our experience with it in the development of an assessment center.

2. In retrospect, the advantage of placing the development of an assessment center in the MBO framework lay in the momentum provided by the top-level management endorsement. This got it off the ground and assured periodic attention at the DD-level. The disadvantage, however, stemmed from the conceptualization of the responsibility for implementation as lying primarily with the resource office, PSS, rather than with the component whose "product" the center will ultimately be. Thus we found ourselves, in the OJCS effort, unilaterally charged with setting milestones and accounting for progress in all phases of development when in fact we had no control over the pace with which implementation could proceed. This is a bit like General Motors deciding that Chevrolet should produce a new model Corvette, then expecting the chief design consultant and parts suppliers to account for the whole effort. Chevrolet corporate headquarters obviously should have that responsibility, and accountability should be a joint affair. Basically, the objective of establishing an OJCS assessment center should have been an OJCS objective, with PSS committed to providing the resources, rather than the other way around. This not only makes more sense conceptually, but I am certain that faster progress would have resulted from such an arrangement.

5 February 1975

MEMORANDUM FOR: Deputy Chief, Support Division/OMS
SUBJECT : Clinical Division Objectives for
FY 1976 and FY 1977
REFERENCE : DC/SD Memo dated 7 January 1975

The Clinical Division objectives for FY 76 are as follows:

OBJECTIVE I:

The Clinical Division will study the feasibility of a new program for performing medical evaluations on all Agency personnel with Multiphasic Testing.

OBJECTIVE II:

If feasible, and with D/MS approval, the Clinical Division will implement the new program during the last six months of FY 76.

The Clinical Division objectives for FY 77 are as follows:

OBJECTIVE I:

Review and revise (those deemed necessary) the criteria and physical standards for Agency employees being assigned overseas.

OBJECTIVE II:

Review, evaluate and revise Clinical Division resources to implement hypertensive, diabetic and desensitization clinics for Agency employees.

OBJECTIVE III:

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Interphase Clinical Division resources relating to exercise room activities.

Chief, Clinical Division/OMS

OMS

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Approved For Release 2001/07/12 : CIA-RDP78-04163R000100160008-6

14 January 1975

MEMORANDUM FOR: [REDACTED]

25X1A

SUBJECT : FY 1976 - FY 1977 Objective Statements

REFERENCE : Memo of 7 Jan 75, Same Subject

Operations Division has no DCI or DD level objectives.

25X1A

[REDACTED]
Chief, Operations Division
Office of Medical Services

Approved For Release 2001/07/12 : CIA-RDP78-04163R000100160008-6

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EX-2 IMPDET CL BY 186608